Butcher, Loarie H

From:

Barnhart, Jeanne B < Jeanne.B.Barnhart@wv.gov>

Sent:

Wednesday, July 16, 2014 10:34 AM

To: Subject: Butcher, Loarie H RE: Old White Charities

I don't know which class as I didn't take the same ones you did. You will need to call the HelpDesk.

From: Butcher, Loarie H

Sent: Wednesday, July 16, 2014 10:20 AM

To: Barnhart, Jeanne B

Subject: RE: Old White Charities

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Thanks a bunch.

Loarie

From: Barnhart, Jeanne B [mailto:Jeanne.B.Barnhart@wv.gov]

Sent: Wednesday, July 16, 2014 9:49 AM

To: Butcher, Loarie H Cc: Allen, Denise A

Subject: RE: Old White Charities

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Sent: Wednesday, July 16, 2014 9:45 AM

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Subject: RE: Old White Charities

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From: Barnhart, Jeanne B [mailto:Jeanne.B.Barnhart@wv.gov]

Sent: Wednesday, July 16, 2014 9:30 AM

To: Allen, Denise A Cc: Butcher, Loarie H

Subject: RE: Old White Charities

Denise,

OASIS vendor number 000000166506 (*166506)

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If you are paying with a P-Card you need to go through the Auditor's office process.

Jeanne Barnhart
Vendor Registration Coordinator
Purchasing Division
Department of Administration
State of West Virginia
ph. 304-558-2311
fax 304-558-3507

From: Allen, Denise A

Sent: Tuesday, July 15, 2014 4:40 PM

To: Barnhart, Jeanne B Cc: Butcher, Loarie H

Subject: Old White Charities

Importance: High

Good afternoon Jeanne,

Just following up on a voice message I left you a few minutes ago – we are trying to pay an invoice for Old White Charities. 300 W Main Street, White Sulphur Springs, WV - <u>Vendor #558412.</u>

Per the WV Oasis help desk – Loarie's error is due to vendor owing \$125 – could and would you please help me and let me know if this is the fee from the W9 or more importantly – how can we fix it or find the solution.

As always, - Please and thanks.

Make it a great day!

Denise Allen

Executive Assistant to Administration West Virginia Division of Tourism 90 MacCorkle Ave, SW South Charleston WV 25303

Ph: 304.957.9354 Fax: 304.746.0010



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Davis, Georgina L

From:

Butcher, Loarie H

Sent:

Wednesday, July 16, 2014 4:46 PM

To:

Allen, Denise A

Cc: Subject:

Davis, Georgina L Old White Charities

Denise, please send the WV1A to Jeanne manually. We will figure out how to do in system later. Georgie, please look in TEAM and see if OLD White Charites, Inc. is in there. If they are flagging all that was not in Team, we are going to have major issues with our Grants. There was a time where they said, they did not have to be put in TEAM because they were exempt. :{ So, I am guessing, several of our grants are not in TEAM which means they would be flagged in OASIS.

Denise, you will need to fill out a WV1A per below.

Loarie

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Davis, Georgina L

From:

Butcher, Loarie H

Sent:

Thursday, June 05, 2014 4:18 PM

To:

Davis, Georgina L

Subject:

Fwd: The Greenbrier Classic

Attachments:

State of WV Invoice #1.xls; ATT8162080.htm

Sent from my iPad

Begin forwarded message:

From: "Said, Habibi" < habibi said@greenbrier.com>
To: "Butcher, Loarie H" < Loarie.H.Butcher@wv.gov>
Cc: "Amy S Goodwin" < Amy.S.Goodwin@wv.gov>
Subject: RE: The Greenbrier Classic

Attached is the invoice

Let me know if you need any additional information

Habibi Said Mamone
National Director of Sales and Operations
The Greenbrier Classic
300 West Main Street
White Sulphur Springs, WV 24986
(304) 536-4956 office
(304) 661-9648 cell
(304) 536-7892 fax

www.greenbrierclassic.com

Don't miss your opportunity to experience America's Resort this spring! With over 55 activities on our 10,000-acre playground, The Greenbrier welcomes you and your family to create timeless memories that will last a lifetime. Visit www.greenbrier.com today to learn about all our exciting new offers!

From: Butcher, Loarie H [mailto:Loarie.H.Butcher@wv.gov]

Sent: Thursday, June 05, 2014 2:38 PM

To: Said, Habibi Cc: Amy S Goodwin

Subject: Re: The Greenbrier Classic

I need an invoice also, before I can pay. A sample invoice was attached to the email I had sent to John Klemish.

Sent from my iPad

On Jun 5, 2014, at 1:10 PM, "Said, Habibi" < habibi_said@greenbrier.com> wrote: Attached is the signed document. Please send the check to my attention.

All my best

Habibi Said Mamone
National Director of Sales and Operations
The Greenbrier Classic
300 West Main Street
White Sulphur Springs, WV 24986
(304) 536-4956 office
(304) 661-9648 cell
(304) 536-7892 fax

www.greenbrierclassic.com

Don't miss your opportunity to experience America's Resort this spring! With over 55 activities on our 10,000-acre playground, The Greenbrier welcomes you and your family to create timeless memories that will last a lifetime. Visit www.greenbrier.com today to learn about all our exciting new offers!

From: Terry Miller [mailto:terry.miller@justicecorporation.com]

Sent: Thursday, June 05, 2014 12:23 PM

To: Habibi Said

Subject: Fwd: Message from Accounting - CFO

From: <<u>security@greenbrier.com</u>>

Date: Jun 5, 2014 12:21 PM

Subject: Message from Accounting - CFO To: <a href="mailto: /erry.miller@justicecorporation.com /erry.miller@justicecorporation.com

Cc:

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*********************** *******

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<SAccounting14060512190.pdf>

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I hank you for your cooperation.	
******************	*****

Davis, Georgina L

From:

Davis, Georgina L

Sent:

Thursday, September 25, 2014 2:55 PM

To:

Butcher, Loarie H

Subject:

WV-48

Attachments:

TOR4722 Old White Charities WV48.pdf

Georgie

Georgina Davis
WV Division of Tourism
Department of Administration
90 MacCorkle Avenue, SW
South Charleston, WV 25303
304-957-9339
304-746-0010 fax
georgina.l.davis@wv.gov



1-800-CALL-WVA

<u>www.wvtourism.com</u>

<u>Click Here</u> to view our 2014 State Travel Guide



State of West Virginia Purchasing Division

AGREEMENT

Purchase Order #TOR4722	WVFIMS Account #3067-2015-7511-618-576
TEAM Vendor #	WVFIMS Vendor # 166506 Oasis #
for WV Division of Tourism (Agency) (Name and address) at 90 MacCorkle	nite Sulphur Springs, WV, agree to perform the following services e Avenue, SW, So Chas, WV (Location)
Fulifillment of sponsorship and hospitality services	on of services to be performed) rendered.
Date(s) of Service: from June 30, 2014	to October 31, 2014
The rate of pay shall be \$875,000.00	per N/Anot to exceed
\$ N/A for the e	ntire term of the contract.
completed and signed if the vendo	orporated into the vendor's fee. No travel will be reimbursed nsibility of the vendor. The following certification must be or is a full-time employee of the State of West Virginia.
I am not currently a full-time er	mployee of the State of West Virginia;
☐ I am currently a full-time employ	ee of the State of West Virginia (complete certification below).
It is hereby certified that the services to be pe	rformed under this agreement will not interfere with or detract and the amount of annual compensation received by
(ahove na	med wonder) from the Otto
with the title of	. The vendor serves as
GENERAL TERMS AND CONDITIONS: The Ge and Conditions located on the Purchasing Di TCA.pdf, ("Terms and Conditions") are hereby	neral Terms and Conditions for Agency Delegated Master Terms vision's website at http://www.state.wv.us/admin/purchase/ made a part of this agreement and are specifically incorporated endor certifies that it has reviewed the Terms and O. In the component of the Co
APPROVED BY:	
Agency	Vendor
(Authorized Signature of Agency)	(Vendor's Signature)
(Title)	(Social Security or FÉIN)
(Date)	(Date)
	(====)

OLD WHITE CHARITIES THE GREENBRIER CLASSIC 300 WEST MAIN STREET WHITE SLPHUR SPRINGS, WV 24986 (304) 538-1110

RECEIVED

JUL 09 2015

DIVISION OF TOURISM

ADMINISTRATION

Invoice Number: 0000120-IN

Invoice Date: 6/16/2015

Salesperson: 0001

Tax Schodule: DEFAULT

State of West Virginia

Customer Number: 00-0000076

Customer P.O.:

Ship VIA:

Terms: Due upon receipt

Contact

Item Code Description 11

Custom Package

UM

Quantity

Price

Amount

State of WV Sponsorahlp

500,000.00

Net Involce: 500,000.00 Freight: 0.00 Salas Texc 0.00 Involce Total: 00,000,00

State of West Virginia Purchasing Division

AGREEMENT

Purchase Order #TOR4981 W	VFIMS Account # 3067-20	015-7511-61800
TEAM Vandar #	VFIMS Vendor # 0000001	
for WV Division of Tourism (Name and address)	our Springs W/V	
for WV Division of Tourism (Name and address) at 90 MacCorkle Avenue	SW So Chee Mar	perform the following services
(Agency) (Local	tion)	
Presenting Partner Sponsorship of The Greenbrier Classic	to be performed) Golf Tournament.	
Date(s) of Service: from June 1, 2015		
\$ N/A for the entire ter	_per N/A	not to exceed
W.		
NOTE: Any anticipated travel must be incorporate by the State and is the sole responsibility completed and signed if the vendor is a f	OTTHE VENDOR The Sell.	
Please check the appropriate box below:		
I am not currently a full-time employee	of the State of West Virg	ginja:
I am currently a full-time employee of th	e State of West Virginia (Complete certification below)
It is hereby certified that the services to be performed from the full-time duties of the employee and a	under this agreement wi	not interfere with or detract
from the full-time duties of the employee and t	ne amount of annual	compensation received by
employment during the current fiscal years will be \$	ndor) from the State of	West Virginia for full-time
employment during the current fiscal year will be \$ with the title of	The vendor serves	as (Position)
with the title of,	certified by	(Supervisor's Signature)
GENERAL TERMS AND CONDITIONS: The General Te and Conditions located on the Purchasing Division's TCA.pdf , ("Terms and Conditions") are hereby made a pherein by reference. By signing this agreement, Vendor ce understands them, and agrees to be bound by their prov	website at http://www.si part of this agreement and prifices that it has reviewed the	ency Delegated Master Terms tate.wv.us/admin/purchase/
APPROVED BY:		
Agency West Virginia Division of Tourism	Vendor Mode	ite Shristes Fie.
Sunstelle Hoodeer	bu dr	Zel
(Milliorized Signature of Agency)	27-13	67963
4/8 15	4-9-3	Security of EEIN)
(Date)		(Date)

RFQ No.	

STATE OF WEST VIRGINIA Purchasing Division

PURCHASING AFFIDAVIT

MANDATE: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (*W. Va. Code* §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:
Vendor's Name: Me white cheibes Tie.
Authorized Signature: Date: 49-2015
State of West Virginia
County of Green brief, to-wit:
Taken, subscribed, and sworn to before me this 9 day of sorit, 2015.
My Commission expires April 16 , 20 17.
AFFIX SEAL HERE NOTARY PUBLIC
OFFICIAL SEAL Notary Public, State of West Virginia SANDY KING

236 Evans Mountain Rd. Crawley, WV 24831 Paid Checks

Menu Back

Browse Clear

Bank Account: 0001 Document Code:

Check / EFT Number: Doc Dept: 0304

Check / EFT Amount: Document ID: AUTO1600030190

Record Date: Cleared Date:

Last Action Date: Status:

	Bank Account	Check / EFT Number	Check / EFT Amount	Document ID	Status	Cleared Date	Cancellation Reason	Comments	Trace Number
2	The state of the s	000001001067439 Prev Next Last	\$500,000.00	AUTO1600030190	Paid	07/24/2015			290108037

Paid Check Restore

Check Writer Payment

Accrual Inquiry

Paid Checks Update

January Man

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JUNE 29 ~ JULY 5, 2015 • THE OLD WHITE TPC • WHITE SULPHUR SPRINGS, WV

TOURNAMENT INFO

TOURNAMENT INFO

THANK YOU to the hundreds of thousands of spectators, sponsors and volunteers that graced the paths of The Old White TPC during the 2014 Greenbrier Classic. Without your dedication and support The Greenbrier Classic would not be the *Event of the Summer* on the PGA TOUR.

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PRESENTING PARTNERS









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West Virginia Secretary of State — Online Data Services

Business and Licensing

Online Data Services Help

Business Organization Detail

NOTICE: The West Virginia Secretary of State's Office makes every reasonable effort to ensure the accuracy of information. However, we make no representation or warranty as to the correctness or completeness of the information. If information is missing from this page, it is not in the The West Virginia Secretary of State's database.

OLD WHITE CHARITIES, INC.

Organiza	tion Info	mation					. 1/10/11	
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason
C Corporation	12/29/2009		12/29/2009	Domestic	Non- Profit			

Business Purpose		Capital Stock	
Charter County	Greenbrier	Control Number	99HXQ
Charter State	w	Excess Acres	
At Will Term		Member Managed	
At Will Term Years		Par Value	
Authorized Shares			

Туре	Address	
Local Office Address	300 W. MAIN STREET ATT: CHARLES A. HENTHORN WHITE SULPHUR SPRINGS, WV, 24986	
Mailing Address	300 W. MAIN ST. ATT: CHARLES A. HENTHORN WHITE SULPHUR SPRINGS, WV, 24986 USA	
Notice of Process Address	CT CORPORATION SYSTEM 5400 D BIG TYLER ROAD CHARLESTON, WV, 25313	
Principal Office Address	300 W. MAIN STREET WHITE SULPHUR SPRINGS, WV, 24986 USA	
Туре	Address	

pe	Name/Address
y pe	
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Director	JAMES C. JUSTICE III 302 S. JEFFERSON ST. ROANOKE, VA, 24011
Incorporator	JOHN F. ALLEVATO SPILMAN THOMAS & BATTLE, PLLC P.O. BOX 273, 300 KANAWHA BLVD. EAST CHARLESTON, WV, 25321 USA
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Treasurer	JAMES C. JUSTICE, III 302 S. JEFFERSON ST. ROANOKE, VA, 24011

	CATHY L. JUSTICE 300 W. MAIN STREET WHITE SULPHUR SPRINGS, WV, 24986	
Туре	Name/Address	

ate	Filed For	
10/23/2014	2015	
4/16/2013	2014	
6/19/2012	2013	
2/22/2011	2012	
10/29/2010	2011	
ite	Filed For	

For more information, please contact the Secretary of State's Office at 304-558-8000.

Wednesday, April 1, 2015 — 10:59 AM

© 2015 State of West Virginia

Butcher, Loarie H

From:

Butcher, Loarie H

Sent:

Wednesday, July 08, 2015 2:23 PM Davis, Georgina L

To:

Do we have the second invoice for the PGA?

State of West Virginia Purchasing Division

AGREEMENT

Purchase Order #TOR4981	WVFIMS Account #3067-2015-7511-6	1800
TEAM Vander #	WVFIMS Vendor # 000000166506 Oa	
for WV Division of Tourism	ulphur Springs, WV , agree to perform the	ne following services
for WV Division of Tourism at 90 MacCorkle Aver	nue, SW, So Chas, WV	
Presenting Partner Sponsorship of The Greenbrier Class	rices to be performed)	
	us don rounament.	
Date(s) of Service: from June 1, 2015	to October 15, 2015	
The rate of pay shall be \$500,000.00	per N/A	not to exceed
\$ N/A for the entire t	term of the contract.	not to exceed
NOTE: Any anticipated travel must be incorporately the State and is the sole responsibility completed and signed if the vendor is a		
Please check the appropriate box below:		
I am not currently a full-time employed	ee of the State of West Virginia;	
☐ I am currently a full-time employee of	the State of West Virginia (complete	certification below).
It is hereby certified that the services to be performed from the full-time duties of the employee and	ed under this agreement will not inter	riere with or detract
(above nemed	Transfer of the second	
with the title of	, certified by	(Position)
OCHER AL PERSON	(Supervisor's Si	gnature)
GENERAL TERMS AND CONDITIONS: The General and Conditions located on the Purchasing Division' TCA.pdf, ("Terms and Conditions") are hereby made herein by reference. By signing this agreement, Vendor understands them, and agrees to be bound by their process.	a part of this agreement and are speci	s/admin/purchase/
APPROVED BY:		
Agency West Virginia Division of Tourism	Vendor Monthite	Christes Tie.
(Bishorized Signature of Agency)	i by Whe	
(Shille Since	27-156 796	63
(Date) 15	4-9(Social Security of FEIN)	
•	(Date)	

RFQ No.	

STATE OF WEST VIRGINIA Purchasing Division

PURCHASING AFFIDAVIT

MANDATE: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (*W. Va. Code* §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:
Vendor's Name: Monthite Chaites Tic.
Authorized Signature: Date: 49-2015
State of West Virginia
County of Greenbrier, to-wit:
Taken, subscribed, and sworn to before me this 9 day of April 2015.
My Commission expires 16 , 20 17.
AFFIX SEAL HERE NOTARY PUBLIC
OFFICIAL SEAL OFFICIAL SEAL Notary Public, State of West Virginia

SANDY KING 236 Evans Mountain Rd. Crawley, WV 24931 Immission expires April 18, 201

Davis, Georgina L

From:

Butcher, Loarie H

Sent:

Wednesday, April 08, 2015 9:33 AM

To:

Davis, Georgina L

Subject:

FW: State of WV Invoice

Attachments:

State of WV Invoice 2015 \$500,000.pdf; ATT00001.htm

Attached is the Greenbrier invoice. Please put on your calendar to start the process to pay this invoice first of June, maybe even end of May since we had so many issues the last time. I think it looks ok. Let me know if you see any issues.

Thank You.

Loarie

Invoice

OLD WHITE CHARITIES 300 WEST MAIN STREET WHITE SLPHUR SPRINGS, WV 24986 (304) 536-1110

Invoice Number: 0000035-IN

Invoice Date: 3/26/2015

Salesperson: 0001

Tax Schedule: DEFAULT

State of West Virginia

Customer Number: 00-0000076

Customer P.O.:

Ship VIA:

Contact:

Terms: Due upon receipt

 Item Code
 Description
 UM
 Quantity
 Price
 Amount

 6
 Presenting Partners
 500,000.00

 The Greenbrier Classic/Presenting Partners
 500,000.00

RECEIVED

APR 0 1 2015

DIVISION OF TOURISM ADMINISTRATION

 Net Invoice:
 500,000.00

 Freight:
 0.00

 Sales Tax:
 0.00

 Invoice Total:
 500,000.00

1

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 500,000.00

 Freight:
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 Sales Tax:
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 Invoice Total:
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Paid Checks

Menu Back

Browse Clear

Bank Account: 0001

Document Code :

Check / EFT Number :

Doc Dept: 0304

Check / EFT Amount :

Document ID: AUTO1501037161

Record Date:

Cleared Date :

Last Action Date :

Status :

	Bank Account	Check / EFT Number	Check / EFT Amount	Document ID	<u>Status</u>	Cleared Date	Cancellation Reason	Comments	Trace Number
· ·	0001	000001000983981	\$500,000.00	AUTO1501037161	Paid	06/09/2015			290472998

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At Will Term Years		Par Value	
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Shares			

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DAYS HOURS MINS SECS

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Butcher, Loarie H

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